

Printed Name: 45%)

Capacity/Title: OUNER

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

09 MAY 14 AM 8: 24

SECRETARY OF STATE STATE OF IDAHO

FILED EFFECTIVE

Please type or print legibly. NOTE: See instructions on reverse before filing.

. The true name(s) and business addres business under the assumed business	
Name	Complete Address
JASON YOUNG	1325 N 10th DIACE
	COENTY AIENE TO
4	83815
. The general type of business transacte	d under the assumed business name is:
☐ Retail Trade ☐ Transport ☐ Wholesale Trade ☐ Construct ☐ Services ☐ Agricultur ☐ Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Es	tate Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed:	I ARONATA STRAAT
1325 N 10th place COENCY AVENE TO 83815	(208) 334-2301
 Name and address for this acknowled copy is (if other than # 4 above). 	lgment
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